PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

This form should be used for transmitting the ISSUE FFF and PUBLICATION FFF (if required). Blocks 1 through 5 should be completed where

annronriate All further	correspondence includir d below or directed oth	ng the Patent, advance or	rders and notification of r	naintenance fees w	vill be mailed	to the current	correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPONDE	Fee pap	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
32294 SQUIRE, SAN 14TH FLOOR 8000 TOWERS	I he Stat additran	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
TYSONS CORN	IER, VA 22182	\ B					(Depositor's name)
TYSONS CORNER, VA 22182							(Signature)
							(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
09/528,001	03/17/2000		Shiri Kadambi		P108339-00003		3385
FITLE OF INVENTION	: NETWORK SWITCH	STACKING CONFIGUR		T			·-
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TO	TAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$ 0		\$1400	01/29/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS]			
HOANG,	THAI D	370-400000					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Squire, Sanders & Dempsey, LLP.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	pe)			
PLEASE NOTE: Unl recordation as set fort	h in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the p T a substitute for filing an (B) RESIDENCE: (CITY	assignment 24/20	07 MAHMED2	ed below, the do 00000023 09	ocument has been filed for 528001
` ,		01 FC:1501			1400.00 OP		
Broadcom Corporation Irvine, Californ a 39.00 Op							
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🖾 Co	orporation or	other private gro	up entity Government
4a. The following fee(s) are submitted: 1 Issue Fee 1 Publication Fee (No small entity discount permitted) 2 Advance Order - # of Copies 10 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 2 A check is enclosed. 2 Payment by credit card. Form PTO-2038 is attached. 3 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 30-2222 (enclose an extra copy of this form).							
5. Change in Entity Sta	tus (from status indicate	d above)					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
• • •	s SMALL ENTITY state		☐ b. Applicant is no lon				
NOTE: The Issue Fee an interest as shown by the i	d Publication Fee (if req records of the United Sta	uired) will not be accepted tes Patent and Trademark	d from anyone other than to Office.	he applicant; a regi	stered attorne	y or agent; or the	e assignee or other party in
Authorized Signature	Petro		Date		y 22, 200	7	
Typed or printed name Peter Flanagan			58,178 Registration No.				
This collection of informan application. Confident submitting the complete	ation is required by 37 Citality is governed by 35 d application form to the	CFR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary	on is required to obtain or in 1.14. This collection is est of depending upon the individual of the collection of the co	retain a benefit by the timated to take 12 revidual case. Any co	he public whi minutes to comments on the	ch is to file (and mplete, including the amount of tin	by the USPTO to process) g gathering, preparing, and he you require to complete

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.